APPENDIX 1

[bandcurq.doc 2/2/01]
[revised 2/26/01]

Hello, my name is _____. I'm calling for the Center for Opinion Research at Millersville University. We are conducting a survey on what people know and think about cigarette smoking. May I speak with the adult who is 18 years of age or older who last celebrated a birthday has a birthday IF YES, CONTINUE WITH INTERVIEW

[TO RESPONDENT] The survey will take 20 minutes to complete and your participation is important. Responses will be kept confidential and data will only be reported in group form. If you don't want to answer a particular question, just tell me and we'll move on to the next question. Are you willing to complete the interview?

IF YES, CONTINUE WITH INTERVIEW.

[AGE QUALIFICATION/SMOKING HISTORY]

1. What year were you born?

2. Have you smoked at least 100 cigarettes in your entire life? YES NO
[If asked, 100 cigarettes is about 5 packs]
IF NO – ASK IF THERE IS ANOTHER ADULT IN THE HOUSE THAT CAN BE INTERVIEWED

3. Do you now smoke cigarettes every day, just some days, or not at all?
IF NOT AT ALL – ASK IF THERE IS ANOTHER ADULT IN THEHOUSE THAT CAN BE INTERVIEWED

4. IF EVERY DAY: On the average day, how many cigarettes do you usually smoke?
[CODE EITHER RESPONSE]
_____ number of cigarettes
_____ number of packs

5. IF SOME DAYS: On how many of the last 30 days did you smoke cigarettes?

6. IF SOME DAYS: On the average, during the {number of days} you smoked in the PAST 30 DAYS, about how many cigarettes did you smoke a day?

7. Have you smoked a pipe of tobacco at least 50 times in your entire life? YES NO
IF YES:
8. Do you now smoke a pipe of tobacco every day, some days, or not at all?
EVERY DAY/SOME DAYS/NOT AT ALL

9. Have you smoked a cigar at least 50 times in your entire life? YES NO
IF YES:
10. Do you now smoke cigars every day, some days, or not at all? EVERY DAY/SOME DAYS/NOT AT ALL

11. Have you used snuff (such as Skoal, Skoal Bandits, or Copenhagen) at least 20 times in your entire life? YES NO
IF YES:
12. Do you now use snuff every day, some days, or not at all? EVERY DAY/SOME DAYS/NOT AT ALL

Source: https://www.industrydocuments.ucsf.edu/docs/gqnj0001

13. Have you used chewing tobacco (such as Redman, Levi Garrett, or Beechnut) at least 20 times in your entire life? YES NO

IF YES:

14. Do you now use chewing tobacco every day, some days, or not at all? YES NO

15. Now, think back to when you first started smoking cigarettes. How old were you when you first tried cigarette smoking, even a puff? [Age: _____]

16. About how old were you when you FIRST started to smoke everyday for at least one month? [Age: ____]

17. Have you EVER stopped smoking for one day or longer because you were TRYING to quit smoking? YES NO

IF YES:

18. During the past 12 months, have you stopped smoking for one day or longer because you were TRYING to quit smoking? YES NO

19. How many minutes after awakening do you have your first cigarette? LESS THAN 5 MINUTES/ 6-30 MINUTES/ 31-60 MINUTES/ MORE THAN ONE HOUR

20. Do you think your risk of having a heart attack is higher, lower, or about the same as other (men/women) your age? HIGHER / LOWER / SAME

21. Do you think your risk of cancer is higher, lower, or about the same as other (men/women) your age? HIGHER / LOWER / SAME

22. Do you think your risk of lung cancer is higher, lower, or about the same as other (men/women) your age? HIGHER / LOWER / SAME

23. If 100 people are diagnosed with LUNG CANCER today, how many are likely to be ALIVE 5 years from now?
(_____ people, number between 0 and 100)

[HEALTH EFFECTS OF CIGARETTES]

24. When you first started to smoke, how much did you think about how smoking might affect your health? A LOT/A LITTLE/NOT AT ALL/DK

25. How much do you think about how smoking might affect your health now? A LOT/A LITTLE/NOT AT ALL/DK

26. When you first started smoking, did you think you would continue to smoke for as long as you have? Y/N/DIDN'T THINK ABOUT IT/DK

27. Do you consider yourself to be adequately informed about the health risks from smoking? YES NO

28. Do you think you will quit smoking? Y/N/DK

29. Do you think you will quit smoking before you experience a serious health problem caused by smoking? Y/N/DK

30. If we called you back in a year, will you be smoking? Y/N/DK

31. How about within 5 years?

Source: https://www.industrydocuments.ucsf.edu/docs/gqnj0001

32. If you decided to give up smoking altogether in the next twelve months, how likely do you think you would be to succeed? VERY LIKELY/ SOMEWHAT LIKELY/ SOMEWHAT UNLIKELY/ VERY UNLIKELY/ DON'T KNOW

33. Do you think that it is easier these days for you to quit because of the availability of stop-smoking medications?

[AWARENESS OF TOBACCO PRODUCT CHANGES]

34. Cigarette manufacturers have changed their cigarettes in a variety of ways over the last 50 years. For each of the following changes, tell me if you think the change has made the cigarette LESS dangerous to the smoker:

35. Addition of filters YES NO
36. Reduction of tar YES NO
37. Reduction of nicotine YES NO
38. Removed additives YES NO

39. Do you think that cigarette companies could make their cigarettes less dangerous than they are today? YES NO DON'T KNOW

[BRAND HISTORY]

I'm going to ask you some questions about your current brand. [if says no current brand, ask to refer to most recent]

40. What is your current brand of cigarettes? _____

41. Do you think the [insert current brand] you usually smoke are ...
1. More hazardous to health than other kinds of cigarettes
2. Less hazardous to health than other kinds
3. About the same as other kinds
4. Don't know

42. In your opinion, would you say ...
1. Some kinds of cigarettes are more hazardous to health than others
2. All cigarettes are about equally hazardous
3. That cigarettes are not hazardous to health at all
4. Don't know

43. Do you have a pack of your current cigarettes within reach? YES NO

IF YES:

44. Please take a look at your pack. On its side you may see a series of numbers and dark black LINES, sometimes called the Bar Code. Do you see this code anywhere on your pack? YES NO

45. There will be either six or ten numbers printed just below the LINES. There will also be 2 smaller print numbers that come before and after the LINES. Ignoring those 2 smaller numbers, please tell me if the number that is written just below the LINES is a 6 digit or a 10 digit number. If you cannot read it, we'll just move on to the next question.

Please tell me the (10 DIGIT) number that is written just below the lines.

OR

Please tell me the (6 DIGIT) number that is written just below the lines.

Source: https://www.industrydocuments.ucsf.edu/docs/gqnj0001

46. Please let me verify the number with you. Is it _____? YES NO

IF NO UPC CODE AVAILABLE, ASK:

47. Does your regular brand have a filter? YES NO
48. Is it regular/light/ultralight?
49. Is it menthol or nonmenthol?

50. How long have you been smoking this brand?

51. Have you ever regularly smoked any cigarettes other than (previously mentioned brand) for at least 6 months?

IF NO: skip to 65.

IF YES:

52: Think of the most recent time you switched brands. What cigarette brand did you switch FROM: _____

53. Did that brand have a filter? YES NO
54. Was it regular/light/ultralight? _____
55. What year did you switch?
56. Why did you switch?
    57. cheaper YES NO
    58. tastes better YES NO
    59. pain in chest, throat, or lungs YES NO
    60. not as bad for you/ safer/ healthier YES NO
    61. less tar YES NO
    62. less harsh YES NO
    63. coughing too much YES NO
    64. trying to quit YES NO

[AWARENESS AND USE OF PRODUCTS DESIGNED TO HELP PEOPLE STOP SMOKING]

65. If you wanted to QUIT SMOKING in the future, what method would you use?

Probe: Anything else?

Probe until no further ideas come to mind.

[acupuncture
behavior modification
candy
cold turkey
food
gradual reduction
herbal cigarettes
hypnosis
mouthwash that makes cigarettes taste bad
nicotine gum
nicotine inhaler
nicotine nasal spray
nicotine patch
quit with a friend
special filters
Wellbutrin/Zyban
Advice from your doctor
Advice from a nurse or other health professional
Advice from a pharmacist
Advice from a dentist
Nicotine lozenges

Source: https://www.industrydocuments.ucsf.edu/docs/gqnj0001

Other products available from chemists
Leaflets with advice and practical tips on how to stop smoking
Books with advice and practical tips on how to stop smoking
How to stop smoking videos
Stop smoking competitions
Stop smoking clinics/stop smoking group
Quitlines
Drop-in stop smoking centers
Advice from friends
Advice from family
Willpower
other (specify):_____]

[USE OF NICOTINE REPLACEMENT PRODUCTS AND ZYBAN]

Now I'm going to ask you some questions about some products that drug companies have made to help people stop smoking.

Have you ever heard of:
66. nicotine patch

ASK ONLY IF YES TO 66, ELSE SKIP TO 90 (Ever heard of gum?)

67. Have you heard of any safety concerns associated with nicotine patches? YES NO
IF YES:
68. What safety concerns have you heard about?
[black-outs, dizziness, nausea, heart attack, stroke, addiction to the product, nasal bleeding, sleep disturbances, stomach bleeding, other (specify) _____]

69. Have you ever used a nicotine patch? YES NO

IF NO to 69, ask 70-76:
Why haven't you used a nicotine patch? Is it because of:
70. not wanting to quit YES NO
71. not safe YES NO
72. cost YES NO
73. quit without needing to use the patch YES NO
74. doesn't work YES NO
75. patches are addictive YES NO
76. other _____

THEN SKIP TO 90 (Ever heard of the gum?)

IF YES to 69, ask 77-89:

77. On how many separate occasions have you used the patch to try to stop smoking in the past year?

78. Have you ever used the nicotine patch with the intention of just cutting down on the amount of cigarettes you smoke every day? YES NO

79. How concerned were you that you might get addicted to the patch—would you say very, somewhat, or not at all?
VERY, SOMEWHAT, NOT AT ALL

Source: https://www.industrydocuments.ucsf.edu/docs/gqnj0001

80. Did you ever smoke cigarettes or use any other tobacco product on the same days that you used the patch? YES NO

IF YES:

81. Did you experience any side effects from smoking and using the patch on the same days? YES NO

82. Did you stop using the patch because you had smoked? YES NO

83. Did you read any of the product insert that came along with the package? YES NO

IF YES:

84. How much of the insert did you read?
[all, about half, less than one-fourth]

85. Are you currently using the patch? YES NO

IF YES:

86. How long have you been on the patch?
[< 1 week OR specify _____ weeks or _____ months]

IF NO:

87. When did you last use the patch?
[< 1 week, 1 week to < 1 month, 1 month to < 3 months, 3 months to < 6 months, 6 months to < 1 year, more than a year]

88. How long did you use the patch?
[< 1 week OR specify _____ weeks or _____months]

89. Why did you discontinue using the patch?
[insurance coverage ran out, wasn't serious about quitting, didn't work, started smoking again, other (specify) _____]

Have you ever heard of:
90. nicotine gum

ASK ONLY IF YES TO 90, ELSE SKIP TO 114 (Ever heard of inhaler?):

91. Have you heard of any safety concerns associated with nicotine gum? YES NO

IF YES:

92. What safety concerns have you heard about?
[black-outs, dizziness, nausea, heart attack, stroke, addiction to the product, nasal bleeding, sleep disturbances, stomach bleeding, other (specify) _____]

93. Have you ever used nicotine gum? YES NO

IF NO to 93, ask 94-100:
Why haven't you used nicotine gum? Is it because of:

94. not wanting to quit YES NO
95. not safe YES NO
96. cost YES NO
97. quit without needing to use the gum YES NO
98. doesn't work YES NO
99. the gum is addictive YES NO

Source: https://www.industrydocuments.ucsf.edu/docs/gqnj0001

100. other _____

THEN SKIP TO 114 (Ever heard of the inhaler?)

IF YES to 93, ask 101-113:

101. On how many separate occasions have you used the gum to try to stop smoking in the past year?

102. Have you ever used the nicotine gum with the intention of just cutting down on the amount of cigarettes you smoke every day? YES NO

103. How concerned were you that you might get addicted to the gum --would you say very, somewhat, or not at all? VERY, SOMEWHAT, NOT AT ALL?

104. Did you ever smoke cigarettes or use any other tobacco product on the same days that you used the gum? YES NO

IF YES:

105. Did you experience any side effects from smoking and using the gum on the same days? YES NO

106. Did you stop using the gum because you had smoked? YES NO

107. Did you read any of the product insert that came along with the package? YES NO

IF YES:

108. How much of the insert did you read?
[all, about half, less than one-fourth]

109. Are you currently using the gum? YES NO

IF YES:

110. How long have you been using the gum?
[< 1 week OR specify ____ weeks or _____ months]

IF NO:

111. When did you last use the gum?
[< 1 week, 1 week to < 1 month, 1 month to < 3 months, 3 months to < 6 months, 6 months to < 1 year, more than a year]

112. How long did you use the gum?
[< 1 week OR specify ____ weeks or _____months]

113. Why did you discontinue using the gum?
[insurance coverage ran out, wasn't serious about quitting, didn't work, started smoking again, other (specify)_____]

Have you ever heard of:
114. nicotine inhaler

ASK ONLY IF YES TO 114, ELSE SKIP TO 138 (Ever heard of nasal spray?):

115. Have you heard of any safety concerns associated with nicotine inhalers? YES NO

IF YES:

116. What safety concerns have you heard about?

Source: https://www.industrydocuments.ucsf.edu/docs/gqnj0001

[black-outs, dizziness, nausea, heart attack, stroke, addiction to the product, nasal bleeding, sleep disturbances, stomach bleeding, other (specify) _____]

117. Have you ever used a nicotine inhaler? YES NO

IF NO to 117, ask 118-124:
Why haven't you used a nicotine inhaler? Is it because of:

118. not wanting to quit YES NO
119. not safe YES NO
120. cost YES NO
121. quit without needing to use the inhaler YES NO
122. doesn't work YES NO
123. the inhaler is addictive YES NO
124. other _____

THEN SKIP TO 138 (Ever heard of the nasal spray?)

IF YES to 117, ask 125-137:

125. On how many separate occasions have you used the inhaler to try to stop smoking in the past year?

126. Have you ever used the nicotine inhaler with the intention of just cutting down on the amount of cigarettes you smoke every day? YES NO

127. How concerned were you that you might get addicted to the inhaler -- would you say very, somewhat, or not at all?
VERY, SOMEWHAT, NOT AT ALL
[very, somewhat, not at all]

128. Did you ever smoke cigarettes or use any other tobacco product on the same days that you used the inhaler? YES NO

IF YES:

129. Did you experience any side effects from smoking and using the inhaler on the same days? YES NO

130. Did you stop using the inhaler because you had smoked? YES NO

131. Did you read any of the product insert that came along with the package? YES NO

IF YES:

132. How much of the insert did you read?
[all, about half, less than one-fourth]

133. Are you currently using the inhaler? YES NO

IF YES:

134. How long have you been using the inhaler?
[< 1 week OR ____ weeks OR ____ months]

IF NO:

135. When did you last use the inhaler?
[< 1 week, 1 week to < 1 month, 1 month to < 3 months, 3 months to < 6 months, 6 months to < 1 year, more than a year]

Source: https://www.industrydocuments.ucsf.edu/docs/gqnj0001

136. How long did you use the inhaler?
[< 1 week OR specify ____ weeks or _____months]

137. Why did you discontinue using the inhaler?
[insurance coverage ran out, wasn't serious about quitting, didn't work, started smoking again, other (specify) _____]

Have you ever heard of:
138. nicotine nasal spray

ASK ONLY IF YES TO 138, ELSE SKIP TO 162 (Ever heard of Zyban?):

139. Have you heard of any safety concerns associated with nicotine nasal sprays? YES NO
IF YES:
140. What safety concerns have you heard about?
[black-outs, dizziness, nausea, heart attack, stroke, addiction to the product, nasal bleeding, sleep disturbances, stomach bleeding, other (specify) _____]

141. Have you ever used a nicotine nasal spray? YES NO

IF NO TO 141, ask 142-148:
Why haven't you used a nicotine nasal spray? Is it because of:
142. not wanting to quit YES NO
143. not safe YES NO
144. cost YES NO
145. quit without needing to use the nasal spray YES NO
146. doesn't work YES NO
147. the nasal spray is addictive YES NO
148. other _____

THEN SKIP TO 162 (Ever heard of Zyban?)

IF YES to 141, ask 149-161 :

149. On how many separate occasions have you used the nasal spray to try to stop smoking in the past year?

150. Have you ever used the nicotine nasal spray with the intention of just cutting down on the amount of cigarettes you smoke every day? YES NO

151. How concerned were you that you might get addicted to the nasal spray -- would you say very, somewhat, or not at all?
VERY, SOMEWHAT, NOT AT ALL
[very, somewhat, not at all]

152. Did you ever smoke cigarettes or use any other tobacco product on the same days that you used the nasal spray? YES NO
IF YES:
153. Did you experience any side effects from smoking and using the nasal spray on the same days? YES NO

Source: https://www.industrydocuments.ucsf.edu/docs/gqnj0001

154. Did you stop using the nasal spray because you had smoked? YES NO

155. Did you read any of the product insert that came along with the package? YES NO

IF YES:

156. How much of the insert did you read?
[all, about half, less than one-fourth]

157. Are you currently using the nasal spray? YES NO

IF YES:

158. How long have you using the nasal spray?
[< 1 week OR specify ___ weeks or ____ months]

IF NO:

159. When did you last use the nasal spray?
[< 1 week, 1 week to < 1 month, 1 month to < 3 months, 3 months to < 6 months, 6 months to < 1 year, more than a year]

160. How long did you use the nasal spray?
[< 1 week OR specify ____ weeks or _____months]

161. Why did you discontinue using the nasal spray?
[insurance coverage ran out, wasn't serious about quitting, didn't work, started smoking again, other (specify) _____]

162. Have you ever heard of any non-nicotine medications, such as Zyban?

[BELIEFS ABOUT GOVT. TESTING/SAFETY CLAIMS OF NRPS]

163. Do you think that cigarettes are evaluated for safety by the U.S. Food and Drug Administration before they are sold to consumers? YES NO

164. Do you believe that the U.S. Food and Drug Administration SHOULD be required to evaluate the safety of cigarettes before they are sold to consumers? YES NO

[TRUE/FALSE SECTION]

I'm going to read you some statements. After I finish each statement, please tell me whether you agree with the statement, disagree with the statement, don't know or don't have an opinion about the statement. We want to know what you think and its perfectly fine for you to give any of these answers.

The first set of questions asks about what is in cigarettes.

165. Cigarettes with no additives may still contain pesticides.
166. Additives used in cigarettes must be tested for safety before they can be used.
167. My cigarette brand contains only natural tobaccos.
168. Cigarette smoke contains nicotine.
169. Cigarette smoke contains carbon monoxide.
170. Cigarette smoke contains lead.
171. Cigarette smoke contains radioactive material.
172. Cigarette smoke contains ammonia.

Source: https://www.industrydocuments.ucsf.edu/docs/gqnj0001

173. There is arsenic in cigarette smoke.
174. Herbal cigarettes have no nicotine.
175. Additive-free cigarettes have no nicotine.

The second set of questions asks about the health risks of different nicotine delivery products.

176. High tar cigarettes are at least twice as likely to cause illness as ones that are low in tar.
177. In the 1950's, cigarette manufacturers promised to stop selling cigarettes if they were found to be harmful to health.
178. Cigarettes still haven't been proven to cause cancer.
179. If a person smokes only 5 cigarettes per day, their chances of getting cancer from smoking are about the same as someone who never smokes.
180. Only about 1 out of 10 smokers die because of smoking.
181. Nicotine can cause cancer.
182. Smoking pipe tobacco is less harmful to your health than smoking cigarettes.
183. Lung cancer has more to do with someone's genetic background than to whether or not they smoke cigarettes?
184. Chewing tobacco is just as likely to cause cancer as smoking cigarettes.
185. Snuff is just as likely to cause cancer as smoking cigarettes.
186. Smoking is less dangerous if you don't inhale.
187. Cigarettes with no additives are safer than the ones that have additives.
188. Using cigarettes at the same time you use a nicotine patch or gum is worse for your health than just using cigarettes.
189. Cigarette companies do not believe that cigarettes are the cause of most lung cancers.
190. The government exaggerates the risks of smoking.
191. Pollution causes more cases of lung cancer in the U.S. today than smoking does.
192. The milder the smoke, the less dangerous the cigarette.
193. There are ventilation holes in the filter of the cigarettes I smoke.
194. If someone is exposed to asbestos, quitting smoking won't make much difference in whether they get lung cancer.

The third set of questions asks about advertising claims made about different nicotine delivery products and cigarettes.

195. The government must approve the advertising claims made about nicotine medications.
196. The government must approve the advertising claims made about cigarette brands, such as no additives.
197. The claim that a cigarette has "no additives" means that it includes only natural tobaccos.
198. The claim that a cigarette brand is low in nicotine means that it is less addictive.
199. Warning labels on cigarette packs are ignored.
200. I would favor using graphic warnings, like pictures of diseased lungs, on cigarette packs.
201. Warnings on cigarette packs should be made larger so they can't be ignored.
202. Warning labels on cigarettes are helpful in educating consumers about the risks of smoking.
203. Cigarette packages should be required to include an insert with information about the risks of smoking.

The fourth set of questions asks about nicotine addiction.

204. It is easy to get addicted to nicotine gum.
205. Snuff is not addictive.
206 Cigarette companies do not believe that most smokers get addicted to cigarettes.
207. Nicotine medications like the patch and gum improve a smoker's chances of quitting successfully.

Source: https://www.industrydocuments.ucsf.edu/docs/gqnj0001

[CLOSED-ENDED QUESTIONS]

Next, I'm going to ask you some questions about your beliefs about light and ultra-light cigarettes.

208. How many light cigarettes would someone have to smoke to get the same amount of tar as from one regular cigarette? (_____ light cigarettes)

209. How many ultralight cigarettes would someone have to smoke to get the same amount of tar as from one regular cigarette? (_____ ultralight cigarettes)

210. Are nicotine patches more likely, about as likely, or less likely to cause someone to become addicted as regular cigarettes? MORE LIKELY / SAME / LESS LIKELY

211. Is nicotine gum more likely, as likely, or less likely to cause someone to become addicted compared with regular cigarettes? MORE LIKELY / SAME / LESS LIKELY

212. Are light cigarettes more likely/about the same/less likely to cause someone to become addicted as regular cigarettes? MORE LIKELY / SAME / LESS LIKELY

213. Are nicotine patches more likely, as likely, or less likely to cause someone to have a heart attack as cigarettes? MORE LIKELY / SAME / LESS LIKELY

[NONBURNING CIGARETTE-LIKE PRODUCTS]

Tobacco companies have recently introduced products that look like cigarettes, but which heat the tobacco, instead of burning it. They claim that these products contain less tar and produce less environmental tobacco smoke. They also say they cause fewer skin tumors in animals and give a lower concentration of cancer-causing chemicals in the smoke.

214. Have you ever heard of these products? YES NO

IF YES:

215. Do you know the names of any of these products? (SPECIFY: _____).

216. Have you ever tried one of these products? YES NO

IF NO TO EITHER 214 or 216:

217. Would you be interested in trying one of these products? YES NO

218. Do you think these products are evaluated for safety by the government before they can be sold to consumers? YES NO

219. Do you believe that the U.S. Food and Drug Administration SHOULD be required to evaluate the safety of these products before they are sold to consumers? YES NO

[FILTER DEFECTS QUESTIONS]

Now I'm going to ask you a few questions about cigarette filters.

220. Do you think a filter makes a cigarette less dangerous than the same cigarette without a filter? YES NO

221. Have you ever heard of any research on whether filter fibers can get into smokers' lungs? YES NO

Source: https://www.industrydocuments.ucsf.edu/docs/gqnj0001

222. Have you ever noticed filter fibers coming off the filter and into your mouth when you smoke? YES NO

223. If you were to learn that some of the filter fibers are inhaled into your lungs, would this new knowledge INCREASE your chances of QUITTING? YES NO

224. If cigarette filter fibers are inhaled into the lungs, would you consider this an additional health risk beyond the exposure to tobacco smoke itself? YES NO

225. If cigarette fibers become loose, and the tobacco companies are aware of this, do you think they should let people know about this? YES NO

[CIGARETTE CO. MAILINGS]

Now I'd like to ask you some questions about things cigarette companies might have sent you in the mail.

Have cigarette companies ever mailed you:

226. discount coupons? YES NO
227. information on the dangers of smoking? YES NO
228. information about the dangers of second-hand smoke? YES NO
229. information on how to get free merchandise or free trips? YES NO
230. advice about how to oppose restriction of smoking in public places? YES NO

[OTHER CIG. CO. INFO. SOURCES]

231. Have you ever gone to any of the cigarette companies' Web sites for information? YES NO

232. Have you ever called or written a cigarette company for information? YES NO

233. Has a cigarette company even informed you that the tar levels reported on cigarette packs do not indicate the amount of tar you may actually get when you smoke that cigarette? YES NO

234. Has a cigarette company ever advised you how you could change your smoking to make it less risky? YES NO

235. Has a cigarette company ever warned you that smoking causes cancer? YES NO

Do you think cigarette companies should be required to provide you with more information about the following:

236. chemicals in cigarette smoke? YES NO
237. how to stop smoking? YES NO
238. health dangers of smoking? YES NO
239. how to get screened for diseases caused by smoking? YES NO

[PERCEPTIONS OF GENETIC TESTING FOR CANCER]

Now I'm going to ask you a few questions about genetic testing for cancer.

240. If you found out that you carry a gene that increases your chances of getting LUNG CANCER, would you:

1. QUIT
2. CUT DOWN

Source: https://www.industrydocuments.ucsf.edu/docs/gqnj0001

3. SWITCH TO LOWER TAR
4. NO CHANGE

241. If you found out that you DO NOT have a gene that increases your chances of getting LUNG CANCER, would it make you less likely to stop smoking? YES NO

242. If a gene associated with LUNG CANCER could be identified from a blood test, would you take the test? YES NO

[DEMOGRAPHICS]

243. [ASK IF NOT OBVIOUS] Sex: Male Female

244. What is the highest grade you completed in school? _____

245. What is your occupation? _____

246. What is your race? Would you say (READ) White, Black, Asian/Pacific Islander, American Indian/Alaska Native, or other?
[White, Black, Asian/Pacific Island, American Indian/Alaska Native, Other (Please specify_____]

247. Are you of Spanish or Hispanic origin? YES NO

248. Would you be willing to participate in future research? YES NO

[THANK PARTICIPANT.]

Source: https://www.industrydocuments.ucsf.edu/docs/gqnj0001